

*** DUPLICATE ***

☐ CORRECTED (if checked)

PAYER'S name, street address, city, state and ZIP code EMPLOYEES' RETIREMENT SYSTEM STATE OF HAWAII 201 MERCHANT STREET SUITE 1400 HONOLULU HAWAII 96813-2980				1 Gross distribution \$ 2,058.36		OMB No. 1545-0119 2006 Form 1099-R	Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.	
				2a Taxable amount \$ 1,839.72				
				2b Taxable amount not determined <input type="checkbox"/> Total distribution <input type="checkbox"/>				
PAYER's Federal ID number 99-6011493		RECIPIENT'S ID number 999-99-9999		3 Capital gain (included in Box 2a) \$ 0.00		4 Federal income tax withheld \$ 0.00		Copy C For Recipient's Records This information is being furnished to the Internal Revenue Service.
RECIPIENT'S name and address PENSIONER R ZZSAMPLE 201 MERCHANT ST STE 1400 HONOLULU HI 96813-2980				5 Employee contributions /Designated Roth contributions or insurance premiums \$ 218.64		6 Net unrealized appreciation in employer's securities \$		
INFO ONLY	Option 1	Ret type 3	Exclusion ratio 0.00	After tax contr 6,560.49	7 Distribution code 7		8 Other %	Attorney Fees 0.00
	Monthly exempt amt 18.22		Amt excluded yr 218.64	Contr recovered 1,202.52				

Form 1099-R

Department of the Treasury - Internal Revenue Service

Notice to Recipient:

• For additional tax information and forms, please visit the ERS website at: <http://www4.hawaii.gov/ers/>

- If there is no entry in box 2a (Taxable amount), the ERS does not have the necessary information to calculate this amount. You may want to get Publication 575, Pension and Annuity Income, from the IRS to help you determine the taxable amount.
- Box 5 (Employee contributions/Insurance premiums) is the portion of your retirement benefits that is excluded from taxable income. This amount represents the after-tax contributions recovered tax free this year.
- Amounts reported in the Attorney Fees box represent legal expenses that are deductible under Internal Revenue Code Sec. 212 as miscellaneous itemized deductions subject to the 2%-adjusted-gross-income limit.
- Please ensure that a sufficient amount of federal income tax is withheld from your pension check and that your Social Security Number is correct. If your Social Security Number is in error, please notify the ERS immediately.
- All benefits received from the ERS are exempt from State of Hawaii income taxes.

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				2a Taxable amount \$ 1,839.72				
				2b Taxable amount not determined <input type="checkbox"/> Total distribution <input type="checkbox"/>				
PAYER's Federal identification number 99-6011493		RECIPIENT'S identification number 999-99-9999		3 Capital gain (included in Box 2a) \$ 0.00		4 Federal income tax withheld \$ 0.00		Copy B Report this income on your Federal tax return. If this form shows Federal income tax withheld in BOX 4, attach this copy to your return.
RECIPIENT'S name PENSIONER R ZZSAMPLE Street address (including apt. no.) 201 MERCHANT ST STE 1400 City, state and ZIP code HONOLULU HI 96813-2980				5 Employee contributions /Designated Roth contributions or insurance premiums \$ 218.64		6 Net unrealized appreciation in employer's securities \$		
				7 Distribution code 7		8 Other %		This information is being furnished to the Internal Revenue Service.
				9a Your percentage of total distribution %		9b Total employee contributions \$		
Account number (optional)				10 State tax withheld \$		11 State/Payer's state no.		12 State distribution \$
				13 Local tax withheld \$		14 Name of locality		15 Local distribution \$

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